



# Parents Speak Up Trainer Guide

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## INTRODUCTION

This 1½-day training of trainers is for program staff from established American Indian/Alaska Native (AI/AN) programs in tribal and urban Indian communities who want to begin to move community norms toward a healthier, more traditional way of life by expanding their programs to include sharing the Parents Speak Up message with AI/AN parents. Healthy traditions in the Native community are key to empowering parents and helping pre-teens and young-teens make healthy choices.

This training will provide participants with an overview of the Parents Speak Up National Campaign and the role of the Native American Outreach Center (NAOC) in the campaign.

The educational and media materials associated with this campaign are based on conversations with parents conducted to provide insight into parents and teens' attitudes about sex. This training will provide an overview of those conversations, as well as strategies for identifying and addressing barriers that prevent parents from having meaningful conversations with their preteens and young-teens about postponing early sexual activity.

The last two sections of the training provide information on available free or low-cost resources and review the media plans and strategies designed to bring attention to the campaign and its message.

## MODULE 1 - NATIONAL CAMPAIGN OVERVIEW

## Overview

This module discusses the history and origin of the campaign, campaign objectives, target audience, national media plan, and 4parents.gov website.

## Time

90 minutes

## **Purpose**

To help participants understand the purpose of the campaign, (i.e., to increase the number of AI/AN parents and extended family members who talk to their children early and often about the importance of delaying sexual activity) and how the national campaign serves as an umbrella for cultural outreach centers and local community outreach efforts.

## **Learning Objectives**

At the conclusion of this module, participants will be able to:

- discuss the mission and objectives of the Parents Speak Up National Campaign and share the information with their local community; and
- raise awareness of the campaign and its message to generate interest in the national media associated with it.

## **Equipment, Materials, and Supplies**

Laptop, LCD projector, and screen Internet access PSA: "Talk to Me" Print ads

## **Room Requirements**

Classroom style seating

## **Training Coordinator (TC) Outline**

Campaign Overview National Media Plan

Parents Speak Up Website: www.4parents.gov

The training coordinator (TC) introduces him or herself and welcomes participants to the training. The TC will provide an overview of the 1½-day training and set the tone for the participants by laying out ground rules for discussions. Because participants may have a wide range of views and values, everyone should be encouraged to participate, share their views, and be respectful of others. The TC asks a pre-determined trainee to give the opening prayer.

Note: It is customary at all Native gatherings to open and close a meeting with prayer. The opening prayer should be given in respect for the practices of the local region. Efforts should be made to show openness to a variety of beliefs and practices to ensure acknowledgement of different ways and different beliefs.

**TC:** The TC will cover the discussion points listed below while encouraging questions and discussions throughout the training.

## **Campaign Overview**

## What is the Parents Speak Up National Campaign?

The Parents Speak Up National Campaign is a national public education campaign funded by the U.S. Department of Health and Human Services (HHS).

The campaign is aimed at parents of 10- to 13-year-olds, encouraging them to talk with their children about the importance of delaying early sexual activity. As a part of the national campaign, HHS is making a special effort to reach Al/AN parents of pre-teens and young-teens. The vast health disparities tribal communities face with regard to teen pregnancy, STDs, and HIV/AIDS demand that we take action in the Al/AN community.

## What is the philosophy of the campaign?

As Native people, we represent different tribes, clans, communities, and families. We come from different parts of the country; some of us come from tribal lands, some from urban areas. Despite our differences, we can all agree on at least one thing – our kids deserve the best possible future. To help ensure a successful future, we try to encourage our kids to get a good education, eat a healthy diet, exercise regularly, etc. What many parents and caregivers may not be aware of is that kids who delay early sexual activity increase their chances of success. That's why HHS has launched the Parents Speak Up National Campaign, to help parents effectively talk to their children about waiting to have sex.

This campaign will employ a mix of public service advertising and community outreach to encourage parents to talk to their children about why they should abstain from early sexual activity.

The success of the Parents Speak Up National Campaign depends not only on the effective combination of a mass media and public outreach campaign, but also on targeted campaigns within our communities. That is the purpose of this training, to encourage existing Al/AN programs to work together to empower parents to effectively communicate this important message early and often to their children.

## What are the guiding principles of the campaign?

- We all have a stake. It is our collective responsibility to promote the healthiest choices for our children and to help them when they face difficult choices.
- The campaign should strive to reach all parents. The impact of teen sex is universal but often impacts different cultures and communities in unique ways. We strive to accommodate unique cultural challenges and values, while helping parents of all backgrounds impart their values to their kids.
- Parents make the difference. When asked, teens say parents have the most influence on their decision about whether to have sex.

## Who is the target audience?

The target audience for this campaign is parents, grandparents, extended family, and other caregivers of 10- to 13-year-old children. With this target group, parents are powerful. More than half of teens (53%) say parents or their own morals, values, and religious beliefs influence their decisions about sex the most — far more than such other influences as friends, the media, teachers and sex educator.<sup>1</sup>

## What are the goals and objectives of the national campaign?

- To significantly increase the number of adolescents who delay the onset of sexual activity.
- To raise parental awareness to help them understand the influence they have on their pre-teens and young-teens, and then help them successfully communicate their values and beliefs to their children.
- To empower parents by helping them overcome the barriers that prevent them from talking to their kids and encouraging them to take action.

## **National Media Plan**

To support our grassroots efforts, a national public education campaign was unveiled beginning in June, 2007. The campaign includes Public Service Announcements (PSAs) and paid advertisements on television and radio; billboards; magazine and newspaper ads; and web banners.

**TC:** Show examples of print ads.

Cora Williams, a 12-year-old Ho-Chunk tribal member from the Chicago area appears in the first year national television spot along with several other children.

**TC:** View PSA and discuss media objectives as follows:

 To reach Native American parents and extended family members who are in a position to provide guidance to children regarding their sexual behavior choices;

<sup>1</sup> The National Campaign to Prevent Teen Pregnancy. (2002) With one voice 2002: America's adults and teens sound off about teen pregnancy. Washington, DC

- To design a media campaign that will provide support for the outreach plan developed by the NAOC; and
- To drive visitor traffic to the campaign website: www.4parents.gov.

As a part of the national campaign, ads will be, or have already been, placed in Al/AN focused newspapers and magazines that will reach urban, tribal, and reservation communities.

In addition to the above media, the campaign will utilize satellite television to reach tribal and reservation communities in rural areas with limited broadcast/cable reception.

- Ads will be placed on both the Dish Network and DirecTV using networks and programming that target adults and families.
- Representatives for the campaign will negotiate for additional exposure through PSA and paid advertising placements.

Parents Speak Up Website: <a href="https://www.4parents.gov">www.4parents.gov</a>

4parents.gov is part of this new national public education campaign to provide parents with the information, tools, and skills they need to help their children make healthy choices.

**TC:** Time permitting, bring 4parents.gov website up on screen and walk participants through each section.

There is no substitute for caring parents or other extended family members who are involved in children's lives. If pre-teens and young-teens are going to make the choices that will enable them to become healthy adults, they need parents to talk frankly with them about sensitive topics like sex and relationships. Parents who have been reluctant to talk with their teens and pre-teens about these issues now have a new resource in this website.

4parents.gov is sponsored by the Office of Public Health and Science, Office of Population Affairs, and the Public Health Service. "Teen Chat," and "Parents, Speak Up!" guides are the result of a collaborative effort between the Administration for Children and Families and the Office of Population Affairs, Office of Public Health and Science.

# MODULE 2 - NATIVE AMERICAN OUTREACH CENTER

## Overview

This module is designed to deepen the participant's understanding of the connection between Native tradition and the Parents Speak Up National Campaign.

## **Time**

60 minutes

## **Purpose**

The purpose of this module is to give participants several tools for spreading the message within their communities.

## **Learning Objectives**

By the end of this module, participants will be able to:

- Describe the connection between traditional rites of passage ceremonies and the campaign;
- Conduct a Talking Circle; and
- Be familiar with the statistics in Indian Country and Alaska that result from early sexual activity.

## **Equipment, Materials, and Supplies**

Laptop and LCD Projector

Screen

Talking stick or eagle feather to use in Talking Circle Parents Speak Up, *Share Your Vision* Workshop Module Tips on Conducting Talking Circles

## **Room Requirements**

Chairs should be arranged in a circle.

#### **TC Outline**

Native American Outreach Center Share Your Vision Talking Circles Get the Facts

## **Native American Outreach Center**

The NAOC was created to conduct outreach to Indian Country and to encourage parents, grandparents, and extended family members to talk to their children about waiting to have sex. The NAOC is not a bricks and mortar institution, but rather a virtual outreach center. The NAOC is doing outreach through a variety of methods including attending national meetings, conferences, and events; and administering a website, emails, and fax blasts. The NAOC website is attached to the 4parents.gov website at: www.4parents.gov/shareyourvision

The NAOC is committed to partnering with parents, students, families, organizations, and communities across Indian Country to ensure that AI/AN families are able to communicate their values and beliefs about important life choices that shape their children's future and to give AI/AN children the skills and confidence they need to be successful.

The NAOC has been conducting outreach over the last year at national and regional events to raise awareness of the campaign, to identify caring parents and community members who can share the information and resources on the local level, and to disseminate the community outreach kits that were developed for Native communities.

Kauffman & Associates, Inc. (KAI), is coordinating the NAOC for HHS. It is a woman-owned/ American Indian-owned business enterprise. KAI has a 17-year track record of providing highquality, management, and research consulting services for clients including federal agencies, American Indian tribes, non-profit organizations, county governments, and private businesses. With headquarters in Spokane, WA and an office in Washington, D.C., KAI's primary fields of expertise include health; education; community and economic development; aging and elder issues; organizational development; and cultural resources. KAI specializes in outreach to Native communities.

KAI is one of three subcontractors working with Rosenberg Communications, Inc. to conduct outreach to parents in Hispanic, African American, and Native American communities with a culturally specific message.

As a part of the national campaign, the outreach centers provide culturally specific input into the national campaign by:

- Helping to create a media outreach plan that is culturally specific;
- Providing input into the creative process;
- Conducting outreach to the targeted communities;
- Starting grassroots campaigns in Indian Country and Alaska;
- Assisting the media campaign in driving traffic to the www.4parents.gov website; and
- Providing recommendations to HHS on further enhancements to www.4parents.org.

#### **Share Your Vision**

Native people recognize the value of parents (including Aunts, Uncles, Grandparents...) in the lives of their children. Parents of AI/AN pre-teens and young-teens each share the unique privilege of guiding their child through the passages and seasons of life and each has a vital influence on his/her child's future.

"Share Your Vision, Share Their Future" is the tagline developed by the NAOC to help make the message of talking to your child early and often about delaying early sexual activity more culturally relevant. For centuries Native people have used symbols to communicate across tribes and throughout generations. Most tribal people, both young and old, recognize the eagle as a symbol of wisdom, strength, power, and protection. The graphic image of the NAOC depicts a father presenting an eagle feather to his son. This image represents the passing down of a father's vision for his son's future, a vision of success, whatever that may be - an education, a family, a career...happiness.

It is a deeply-held tradition among Al/ANs that as our young people prepare to enter into adulthood, the family and community honors and celebrates this passage with ceremony. Every tribe has its own rites of passage or coming of age ceremony. Different tribes have different traditions; some more elaborate than others. It is a traditional time for family members, usually an elder relative, to share expectations and family values in a formal way.

This is also an ideal time for adults to talk to their children about delaying sexual activity, and how it can help them achieve their goals later in life. It is the reason we chose the message "Share Your Vision, Share Their Future." Even if youth don't go through a ceremony, parents can be encouraged to speak up and share their vision, their hopes, and dreams for their children's future with their children.

**TC:** Conduct Rites of Passage group exercise. Ask each participant to provide an overview of the coming of age ceremony for their tribe or region. Discuss similarities and focus on the involvement of parents or older relatives in the process. Discuss community norms and how some communities may more closely follow tribal traditions. Discuss how urban communities participate in coming of age ceremonies, name giving, or other ceremonies.

## **Talking Circles**

Talking Circles are used to create a safe environment for a group of people to talk about a sensitive issue. This non-threatening method of communication may be used to help Al/AN parents who are uncomfortable or troubled about talking with their children about sex and delaying early sexual activity. It is also an opportunity for them to learn from each other how to start these difficult conversations.

TC: Offer talking circles as a tool to be used in their communities to help parents discuss this sensitive issue. Lead a Talking Circle with the participants. The purpose is two-fold: to share information about Talking Circles, and to increase trainee skills and confidence in leading a Talking Circle. At the conclusion, distribute a handout, remind participants that a description of Talking Circles is available on the <a href="https://www.4parents.gov/shareyourvision">www.4parents.gov/shareyourvision</a> website, and discuss any information on the handout that has not emerged during the Talking Circle.

Many tribal communities are plagued by issues of sexual abuse. Talking about sexual activity often triggers painful and powerful emotions like anger or grief, because it can cause an individual to relive past abuse or bring up other negative memories. It's important to prepare for this and to be familiar with local resources such as medical and mental health providers, and traditional healers, and other resources.

## **Get the Facts**

Current strategies for helping teens avoid the pitfalls of early sexual activity – sexually transmitted diseases (STDs), pregnancy, and emotional distress – have been unsuccessful. The result has been the highest rate of teen pregnancy in the industrialized world, alarming rates of STDs among teens, and a growing number of teens who regret the choices they've made. This public education campaign was developed in response to the growing impact on Indian Country and Alaska.

**TC:** Take participants through the "Get the Facts" statistics and link the information about STDs, teen pregnancy, and HIV to how these obstacles can make it more difficult for kids to succeed.

By sharing this information with other parents, you can help them understand the seriousness of these issues and the importance of this campaign to our pre-teen and young-teens, our families, and our communities.

## "What does HIV/AIDS have to do with my child?"

- In 2005, an estimated 1,581 American Indians and Alaska Natives adults and adolescents were living with AIDS.<sup>2</sup>
- In 2004, an estimated 1,506 Al/AN adults and adolescents were living with AIDS.<sup>3</sup>
- Al/AN adults and adolescents currently have the 3rd highest rate of AIDS diagnoses at 10.4 per 100,000, in relation to other ethnic groups; an increase from the rate of 9.5 in 2001.<sup>4</sup>

## "It won't happen to her!"

- 31% of young women become pregnant at least once before they reach the age of 20 -- about 750,000 a year.<sup>5</sup>
- Almost 46% of Indian mothers having their first child are under the age of 20.6

## Teens who become parents:<sup>7</sup>

- Are more likely to end up poor or on welfare.
- Have fewer job opportunities.
- Have fewer educational opportunities.
- Are less likely to marry.

2 Centers for Disease Control and Prevention. Retrieved 9/12/07, from http://www.cdcnpin.org/scripts/population/ native.asp

- 3 Ibid.
- 4 Rushing, C., et.al., Red Talon STD Profile: STD Treatment and Prevention Capacity within Idaho, Oregon, and Washington Tribes. Portland, OR. Northwest Portland Area Indian Heath Board, 2005.
- The Guttmacher Institute. (2006) U.S. Teenage Pregnancy Statistics National and State Trends and Trends by Race and Ethnicity. New York: The Guttmacher Institute.
- 6 Centers for Disease Control and Prevention. Retrieved 9/12/07, from http://www.cdcnpin.org/scripts/population/native.asp
- 7 U.S. Department of Health and Human Services and The Office of Population Affairs. Parents, Speak Up! A Guide for Discussing Relationships and Waiting to Have Sex (Washington, DC, 2007)

## "Aren't sexually transmitted diseases rare?"

- In 2001, Al/ANs had the 2nd highest rates of chlamydia infection, gonorrhea, and syphilis in the U.S.<sup>8</sup>
- In 2003 American Indians were nearly six times more likely than whites to have chlamydia, over three times more likely to have gonorrhea, and twice as likely to have syphilis.<sup>9</sup>

## "They're too young to have sex."

- About 19 million new STD infections occur each year, almost half of them among teens and young adults.<sup>10</sup>
- Thirty-four Al/AN children, younger than 13 years of age, with AIDS, have died since the beginning of the AIDS epidemic through 2004.<sup>11</sup>

<sup>8</sup> Centers for Disease Control and Prevention. Retrieved 9/12/07, from http://www.cdcnpin.org/scripts/population/native.asp

<sup>9</sup> Rushing, C., et.al., Red Talon STD Profile: STD Treatment and Prevention Capacity within Idaho, Oregon, and Washington Tribes. Portland, OR. Northwest Portland Area Indian Heath Board, 2005.

Weinstock H. et al. Sexually transmitted diseases among American youth; incidence and prevalence estimates, 2000. Perspectives on Sexual and Reproductive Health 2004; 36(1):6-10

<sup>11</sup> Centers for Disease Control and Prevention. Retrieved 6/20/06, from http://www.cdcnpin.org/scripts/population/native.asp

# MODULE 3 - OVERVIEW OF RESEARCH AND FINDINGS

## Overview

The Parents Speak Up National Campaign is based on market research that gives insight into the current attitudes, perceptions, practices, and decision-making processes of parents and teens. This research shows that parental involvement has a tremendous impact on reducing risky behavior in teens.

## Time

90 minutes

## **Purpose**

Understanding this research will give participants insight into how to overcome communication challenges they may face when encouraging parents to talk to their children about delaying early sexual activity.

## **Learning Objectives**

By the end of this session participants will:

- Understand the influence that parents have on pre-teens and young-teens;
- Gain a better understanding of the underlying anxieties that lead to the parental barriers that prevent parents from talking with their children about delaying early sexual activity;
- Learn a few techniques to help parents overcome those barriers; and
- Learn how to help parents successfully communicate their values and beliefs to their teens.

## **Equipment, Materials, and Supplies**

Attachment A - Identifying and Addressing Barriers

## **Room Requirements**

Classroom style

## **TC Outline**

Research and Findings
Parental Barriers
Community Outreach Research
Identifying and Addressing Barriers

#### **Focus Group Findings**

PSUNC conducted focus groups to uncover the current attitudes, perceptions, practices, and decision-making processes of parents and guardians of pre-teens and young-teens, as well as the teens themselves, regarding sexual activity. This research was used to create the advertising and educational materials for the Parents Speak Up National Campaign.

The initial research was conducted in the fall of 2005 with 32 focus groups. The groups consisted of eight groups of parents of boys; eight groups of parents of girls; eight groups of teen boys; and eight groups of teen girls. The focus groups included African American, Hispanic, Native American, and White parents and teens.

Most parents do not realize how much influence they have on their pre-teen and young-teens regarding sexual values and decision making. Research shows that parental involvement has a tremendous impact on reducing risky behaviors in teens. In a 2002 survey, nearly 7 out of 10 teens agreed it would be easier to postpone having sex if they were able to have more open, honest communications. Many parents fail to have this conversation or to do so in an effective way. The topic of sex can be a very difficult one to discuss for all parents regardless of race, religion, or economic status.

The focus group also showed that while giving lip service to their responsibility and accepting their role, parents do not understand the clear connection between talking about delaying early sexual activity and its impact on their child's ultimate success and happiness.

Phase I of the research found no significant differences in the attitudes and perceptions of Native American parents and teens from other groups. For all parents this is a topic that can be very difficult to discuss. Parents are filled with anxiety and fear about talking to their children about sex and have a variety of barriers to rationalize why they don't talk...or only have a cursory talk. Some of the reasons parent gave for why they have not discussed or had led only a cursory talk include:

- He/she is not ready yet.
- He'll/she'll come to me when ready to talk.
- They get sex education in school.
- His/her mother deals with that.
- We have talked about it.
- If you talk about it they are more likely to do it.
- If you tell them "no" they will do the opposite.
- I'll get around to it.
- I should be doing it.
- I know where he/she is all of the time and there is no way he/she could be doing anything.
- Who am I to talk? I can't ask my child to live to a higher standard than I did myself.

Breaking through defenses to get parents to communicate their values about sex to their teens is the first crucial step in delaying the onset of sexual involvement.

#### **Parental Barriers**

In the fall of 2006 and winter of 2007, one-on-one interviews were conducted by a psychologist to more deeply explore the parental barriers identified by initial research (e.g., what is at the root of anxieties, which defenses are most prevalent, and how to make the conversation easier). A common theme that emerged was that parents want very much for their children to grow into successful adults.

## **Key findings:**

- The critical issue for parents of teens is balancing "holding on" versus "letting go."
- Parents are extremely uncomfortable talking to their child about sex "it's like pulling teeth."
- Parents employ a full range of classic defense mechanisms (e.g. rationalization, externalization, denial, etc.).
- Parents have moving defenses, when one is challenged they shift to another. This allows them to maintain their self-concept as a good parent.
- Most common defenses fall into three categories:
  - My child isn't ready.
  - If I talk to them, it'll make them want to do it.
  - I don't know how.

The key communication challenge that came out of Phase II of the research was how to break through parents' defenses without overwhelming them and causing them to erect another defense. This will be addressed in a subsequent section.

## **Community Outreach Research**

Support from community programs and organizations is a critical component of the campaign if we are to be successful in encouraging effective communication between parents and teens.

To gain insight into developing strategies that will encourage involvement in grass-roots networking, PSUNC also conducted focus groups with representatives of organizations who work in the area of teenage sexual health from five sectors: health, faith-based, youth, education, and community organizations.

## **General Findings:**

- Word of mouth can be particularly effective since many respondents reported knowing the people in their community who are working on issues related to teen sex.
- Even though there were different viewpoints on issues such as contraception and abstinence, most participants felt the message was worthwhile.
- "Yes, this would help it creates a discussion if nothing else."
- Funding is an issue for many organizations; materials should be free or very lowcost.

## **Identifying and Addressing Barriers**

Based on the research on parental barriers, researchers identified five parental personality types: Dependent, Controlling, Fearful, Immature, and Self-involved. Dependent and Controlling parents seem to be the most prevalent.

- TC: Take participants through the Identifying and Addressing Barriers handout (located in Attachment A) to give them some insight into some of the barriers they may encounter. Note that most parents represent a mix of the categories, and tend to move to a different barrier when the first is challenged. Below are some recommendations for working with each type to overcome common defenses.
- TC: The key message participants should take away from this exercise is: "I can be comfortable telling my child explicitly why I believe they should delay engaging in sexual activity."

This research was used to develop Phase 2 of the national campaign where the focus will be centered on fear of losing the relationship experienced by a parent of a young-teen. Moving forward, the TV and radio spots and print materials are designed to 1) trigger defense and anxiety; 2) replace these reactions by showing how talking to child about waiting to have sex builds the parent's self-esteem; and 3) offer information and support to build confidence and make conversation easier.

**TC:** Show Muffinhead ad. Conduct a role play, with some volunteers playing reluctant parents and others playing community representatives attempting to persuade them to talk to their children. Encourage volunteers to explore the different parental personality types.

## MODULE 4 - BUILDING LONG-TERM AWARENESS

## **Overview**

This module will introduce resources that are available to community organizations as they encourage parents to talk to their children about delaying sexual activity.

## Time

60 minutes

## **Purpose**

The purpose of this module is: 1) to motivate participants to get involved in the campaign and 2) to introduce participants to the free and low-cost materials and resources that are available through the campaign.

## **Learning Objectives**

By the end of this module participants will:

- Become familiar with the resources that are available and how to access them;
- · Learn techniques for encouraging parent commitment; and
- Create a preliminary action plan and timeline for use by their organization or program to raise parental awareness.

## **Equipment, Materials, and Supplies**

Flip chart, markers, and easels
Laptop, LCD projector, and screen
Internet access
Parents Speak Up booklet
Teen Chat booklet
Community Outreach Kits and CDs for each participant
Action Planning Sheet

## **Room Requirement**

Tables set in rounds of six to eight seats.

## **Trainer outline**

Free and low-cost materials NAOC Community Outreach Kit Share Your Vision Workshop Module

**TC:** Take participants through materials and resources from the Parents Speak Up National Campaign and NAOC *Share Your Vision* Workshop Module, including how to download the materials from the Internet.

#### Free and low-cost materials

National campaign website, www.4parents.gov

- Website Resources
  - Talking to Your Pre-Teen or Teen About Waiting

How to talk

Answers to tough questions

Skills your son or daughter needs

Healthy relationships

Sex and Risky Youth Behaviors

Risks of teen sex

Birth control

Alcohol, drugs, tobacco, and violence

Sexual Development and Reproduction

Puberty

Sexual development

Pregnancy

- Parents Speak Up! booklet
- Teen Chat booklet
- NAOC website, www.4parents.gov/shareyourvision
- Community Outreach Kit and CD
- Office of Population Affairs clearinghouse, <u>www.opaclearinghouse.org/abstinence</u>

## The NAOC Community Outreach Kit

**TC:** Distribute NAOC Community Outreach Kit to participants and review each section with group.

## **Share Your Vision Workshop Module**

**TC:** Show Workshop Module and review each section with participants.

# Small Group Discussions – How Can Community Organizations Encourage Parent Commitment?

• Break into groups of six to seven participants, ask each to brainstorm, discuss, record, and report back to the large group.

## **Individual/Organizational Planning**

**TC:** Ask each participant to create a preliminary plan including a situation analysis and task list to take back to his/her community organization. The planning sheet will also include a voluntary personal statement of commitment to be signed by the participant. (Attachment C)

## MODULE 5 - WORKING WITH THE MEDIA

## **Overview**

This module covers the media plan for the Parents Speak Up National Campaign, the media plan for the NAOC, and suggestions to participants on how to generate earned media for their programs.

#### **Time**

60 minutes

## **Purpose**

This module will inform participants about planned media coverage of the campaign and teach techniques to obtain good local publicity and media relations.

## **Learning Objectives**

After completing this module, participants will:

- Become familiar with the media plan for the national campaign;
- · Become familiar with NAOC press materials; and
- Be able to plan publicity for local events.

## **Equipment, material, and supplies**

Parents Speak Up National Campaign Media Kit NAOC press release NAOC talking points NAOC Op-Ed Attachment D - 6 Steps to Great Publicity

## **Room requirements**

Classroom style

## **TC Outline**

Parents Speak Up National Campaign Media Plan NAOC Media Plan Editorials and Opinions

## Parents Speak Up National Campaign Media Plan

The Parents Speak Up National Campaign kick-off was held in Kansas City, MO on June 21, 2007. The kick-off focused on the campaign's mission to encourage parents to share this message with their children: "Wait and you will have a better chance to achieve your goals."

The Parents Speak Up team created a media plan to support the national campaign based on the research discussed earlier. The plan includes carefully placed PSAs on the radio, television, satellite television; as well as advertisements on billboards, bus kings, web banners, and in print beginning in the late summer and early fall.

The PSA "Talk to Me" that was viewed on Day 1 of the training was created based on Phase I of the research and is being shown on television, on the radio, and viewed on outdoor bulletins and bus shelters in several major cities with high Native populations.

The PSA on tv was based on Phase 2 of the research and will be shown as 15 and 30 second spots, on the radio, and viewed on outdoor bulletins and bus shelters. Native Americans will be prominently featured in the national spots.

The campaign relies on a media strategy that includes bundling several markets and networks and negotiating with media organizations to fill empty billboards or time slots to extend the ad placement time.

In addition to the ads created for the general public, culturally specific ads were created for the African American, Hispanic, and Al/AN populations. Examples of some of the print ads have been included in your materials.

#### **NAOC Media Plan**

The NAOC worked closely with HHS to create a paid media plan specific to Indian Country and Alaska that will complement and enhance the activities of the NAOC.

## Media Objectives:

- To reach AI/AN parents and extended family members who are in a position to provide guidance to children regarding their sexual behavior choices;
- To design a media campaign that will provide support for the outreach plan developed by the NAOC;
- To drive visitor traffic to www.4parents.gov;
- To maximize the impact of available resources; and
- To spread the message as quickly as possible.

The strategy of the media plan is to utilize outdoor and/or bus shelter advertising in locations near conference sites in each market to support the NAOC's participation at selected conferences as well as to reach those living in tribal and reservation communities throughout the country. Limited television advertising will be purchased in each market that will reach conference attendees on early morning shows, early evening news, and late night news during the days of the conference. The ads are scheduled to run from August through December 2007.

Full and/or half page print ads in Al/AN focused newspapers and magazines will be placed before, during, and after conferences to reach those who attend the conferences as well as reservation and tribal communities. Wherever possible, representatives will negotiate with the media to obtain bonus placements in addition to paid placements.

Airtime on satellite television will be purchased to reach tribal and reservation communities because they tend to be in rural areas with limited broadcast or cable reception. To maximize coverage, spots will be placed on both DirecTV and Dish Network in programming that target adults and families.

The NAOC also utilizes earned media at the outreach events. Some examples of earned media include:

- The NAOC staff sends out emails and/or faxes to local tribal leaders; tribal and urban Indian health programs; and Title VII Indian Education Grantees in and around the area where each of our events are held. The email or fax introduces the campaign, announces our presence at the event, and directs tribal leaders and health program staff to the <a href="https://www.4parents.gov/shareyourvision">www.4parents.gov/shareyourvision</a> website for additional information.
- A press release is sent to local tribal newsletters and newspapers for inclusion in their next issues prior to each event to introduce the campaign and announce our presence at the event.
- The NAOC staff contacts local newspaper reporters, radio, and television programs
  to bring attention to the campaign, and works with our local partner organizations to
  identify human interest stories or case studies regarding how abstinence issues are
  affecting the local community.
- The NAOC created a press release regarding the involvement of Native American child actor, Cora Williams, in the national PSA, encouraging Al/ANs to watch for the PSA on their local television stations and/or satellite television.

## **Editorials and Opinions**

An article or letter to the editor by a community stakeholder, such as yourself or a local celebrity, can be a powerful way to bring attention to the campaign's message. A sample letter has been provided to use as a guide. Submit your letter to the newspaper editorial page editor, to your local/tribal newsletter editors, or to radio/TV news producers (They sometimes allow "guest columnists" to read on the air.)

- Timing: Op-eds will be of most interest to editors when national PSAs are running or where there is a local tie-in such as an event or news story.
- They may also generate interest from the "news" side of a newspaper or broadcast station
- **TC:** Review the handout 6 Steps to Great Local Publicity with the participants. Ask for a volunteer to share their ideas for publicizing an event.
- **TC:** Wrap up day 2 by thanking participants for their hard work. Remember to respond to any questions and end with a closing prayer.

## ATTACHMENT A

# **◆ IDENTIFYING AND ADDRESSING BARRIERS**

If you hear	they may be feeling	reassuring message
Dependent parent		
"They're not ready."  "I don't want them to grow up too soon."  "When they're ready they'll come to me."	Concerned that they will lose their child if they talk to them about sex.  Desire a strong parent-child bond, fear they will lose it as a child grows up.	Open communication will help you strengthen the bond with your child as he/she grows up. Sexual pressures today can make parents afraid of losing their child, but parents who talk early and often will be more involved in their lives.
Controlling parent		
"I really know what is going on in their life."  "I know where they are and what they are doing. Sex is not an issue."	A strong need to maintain control and concern that their child's freedom may lead to "messiness."	Parents who have open communications about delaying sexual activity will continue to influence their kid's decisions as they grow older. The early teen years are difficult because a parent's influence is increasingly replaced by their child's peers and the media. Talking early and often can help ensure that parents remain a primary influence in their child's life.
Fearful parent		
"If I say something, they'll do it more."  "I don't want to make them more curious."  "It's like Pandora's Box – if I let it out too soon I won't be able to put it back."	Tend to struggle with the idea that introducing the topic of sex into their relationship with their child could unleash uncontrolled sexual feelings in the child and threaten their own attitudes and feelings.	Parents who have open communication with their child can prepare them for dealing with sexual questions and feelings that will come up. Parents sometimes worry that talking to their child will actually unleash their interest in sex, when in fact, by talking early and often, parents can help ensure they understand the importance of controlling their impulses and social pressures.

If you hear	they may be feeling	reassuring message
Immature parent  "My child still thinks sex is 'yucky' which is fine with me."  "I don't know the answers – how am I supposed to explain it to them?"	Embarrassed to talk about sex and are insecure about their own lack of knowledge.	Parents who have open communication with their child about delaying sexual activity can play an important part in their life. Many parents put off talking to their child about sex because the topic makes them feel uncomfortable; it feels like such a mature topic. There is so much pressure on their children to be adults, parents can almost feel it. Talking early and often, however, can make parents feel good about themselves and their
Self-involved parent		involvement in their child's life.
"What if I look bad in front of my kids and can't answer all their questions?"  "I don't have to talk – they know how I feel."	Concerned about how their kids will perceive them if they appear awkward or don't have all the answers.  Can be self-important and assume their kids know how they feel.	Parents who have open communication with their child about delaying sexual activity will help ensure that their children look up to them. Many parents have difficulty talking to their child about sex because the conversation might lead to some difficult questions. But no parent knows all the answers. By talking early and often, parents can play an important role and make a significant difference in their child's life.

## ATTACHMENT B



## BACKGROUND

Parents Speak Up is a national public education campaign developed to provide parents with the information, tools, and skills necessary to help their kids make healthy choices. Funded by the U.S. Department of Health and Human Services, the campaign encourages parents to talk to their children about the importance of waiting to have sex. This Community Outreach Kit is part of a special effort to reach American Indian and Alaska Native (Al/AN) parents of pre-teen and young teens with the campaign message: "Talk with your kids early and often. Tell them you want them to wait to have sex, so they'll have a better chance at success." For help making this conversation easier, visit www.4parents.gov/shareyourvision.

## **PURPOSE**

The Native American Outreach Center was created to help generate a grassroots effort across Indian Country by encouraging parents to talk to their children about the importance of waiting to have sex. This kit is designed as a tool for community leaders to spread the campaign message and to help parents and caregivers communicate it to their kids. Community Outreach Kit materials include:

- 1. The Issue: Information to help parents and other community members understand the abstinence issue and the need for campaign support.
- 2. Talking Circle: This guide provides information on starting a talking circle. Most parents find it difficult to talk about sexual issues with their children. A talking circle can provide a safe environment to talk with other parents or family members who are facing similar issues with their kids.
- 3. The Facts: A fact sheet on Sexually Transmitted Diseases (STDs), HIV/AIDS, and pregnancy rates among AI/ANs. By sharing this information with other parents, you can help them understand the seriousness of these issues and the importance of this campaign to our pre-teens and young teens, our families, and our communities.
- 4. Our Partners: A list of organizations who have agreed to assist in this grassroots effort to reach Al/AN parents and family members with the campaign message.
- 5. Parent Commitment Card: A commitment card in the shape of an eagle feather is a cultural reminder to parents about the important responsibility of talking with their children.
- 6. Posters (2): Posters to communicate the campaign message to your community that may be displayed in your local clinic, school or community center.
- 7. Compact Disc: A CD which includes all of the materials in this kit in an electronic format so you can reproduce as many copies as needed for distribution in your community.

## ATTACHMENT C





## Parents Speak Up National Campaign

When parents speak up, kids listen. The decision to wait to have sex is one of the most important decisions a pre-teen or young teen can make. As parents (or other caretakers), community leaders, and educators you share a common responsibility to guide adolescents as they navigate important life choices, including choices regarding sexual behavior. Adolescents are bombarded daily with messages about sex everywhere -- from television programs to popular songs to magazine articles. Media messages are just one contributor to the alarming state of sexual activity among American teenagers today.<sup>1</sup>

## Did you know that:

- About 46% of high school students in the U.S. have had sexual intercourse.
- Each year, one in four teens contracts an STD.
- First-time AI/AN mothers, on average, are YOUNGER than first-time African American, Hispanic, or white mothers.
- Most sexually active teens wish they had waited longer to have sex.

Sexual activity is a sensitive subject; however, if you don't bring it up, you know their friends and the media will. The Parents Speak Up National Media Campaign provides an opportunity to empower parents and communities to take an active role in a child's life. Now is the time to talk with your pre-teen or young teen, to tell them about the importance of waiting to have sex, so they'll have a better chance at success. For more information on how to help kids make wise decisions you can go to www.4parents.gov/shareyourvision.

<sup>1</sup> Centers for Disease Control and Prevention. Retrieved from http://www.cdcnpin.org/scripts/population/native.asp on 6-20-06.

Olympia A PRIVICES (CA.)

# TALKING CIRCLE

## TALKING CIRCLE

By Joseph Stone, PhD

The traditional "talking circle" is a very old way of bringing Native people of all ages together in a quiet, respectful manner for the purpose of teaching, listening, learning, and sharing. When approached in a certain way, the circle can be a very powerful means of touching or bringing some degree of healing to the mind, the heart, the body, or the spirit. One could call it a very effective form of Native group therapy.

The circle leader, teacher, or facilitator begins by passing around sweetgrass, cedar, or sage so that the participants may "smudge" themselves. Our ancestors have taught us that these sacred herbs have a purifying effect upon our total being. As smoke from the herbs surrounds us, we are better able to connect on many levels, including with others within the circle, with ourselves, and with what we are about to experience.

The group leader (or a volunteer) then opens the circle with a prayer. The circle is now in the hands of the Great Spirit, Grandfather, God, or whatever one chooses to call the Higher Power. Next, the leader might have the people shake hands to acknowledge each other. It is a good thing to do, especially if this is a new circle of people.

The group leader then begins to talk to the people without interruption, talking not to one person, but to all who are present.

All are expected to listen respectfully until the speaker is finished. All who sit within the circle will have an opportunity to express themselves if they choose, or they may simply listen, but all who speak will be given the same respect – they will be listened to.

# TALKING CIRCLE

The group leader, and most likely others within the circle, may bring eagle feathers, stones, or other sacred objects that are passed around the circle and shared. We believe these sacred things to be helpers in furthering the connections to spirit and to other higher selves. They help us listen, they aid in our learning.

Within the sacred circle we are encouraged to speak not only from the mind, but also from the heart; we are free to share our innermost feelings if we choose. Regardless of whether one brings a traditional teaching or a personal problem to the circle, all persons are valued, respected, and listened to. There is an Indian belief of: right time/right place/right people/hearing right things; we rely on that belief within the circle.

When all have spoken, anyone may request that this be a "closed circle," meaning that all that has been said and all the identities of the participants shall be confidential. If no one requests a closed circle, all may freely share what they have learned.

The circle is closed with a prayer. So – in this old way we have come together again to teach, to learn, to touch each other's spirit; that we may find strength to live in these two worlds; that our people may live.

Reprinted with permission from Joseph Stone, PhD

# THE FACTS

# "WHAT DOES HIV/AIDS HAVE TO DO WITH MY CHILD?"

- From the beginning of the AIDS epidemic through 2005, 3,238 AI/ANs have been diagnosed with AIDS and 1,657 AI/ANs with AIDS have died.<sup>1</sup>
- At the end of 2005, 1,581 Al/AN adults and adolescents were living with AIDS.<sup>2</sup>
  - AI/AN adults and adolescents currently have the 3rd highest rate of AIDS diagnoses, at 10.4 per 100,000, in relation to other ethnic groups; an increase from the rate of 9.5 in 2001.<sup>3</sup>

# "AND IT WON'T HAPPEN TO HER!"

- About 750,000 teen girls become pregnant every year.<sup>4</sup>
- First-time AI/AN mothers, on average, are YOUNGER than first-time African-American, Hispanic, or white mothers.<sup>5</sup>

## **TEENS WHO BECOME PARENTS<sup>6</sup>:**

- 1. ARE MORE LIKELY TO END UP POOR OR ON WELFARE.
- 2. HAVE FEWER JOB OPPORTUNITIES.
- 3. HAVE FEWER EDUCATIONAL OPPORTUNITIES.
- 4. ARE LESS LIKELY TO MARRY.

# "AREN'T SEXUALLY TRANSMITTED DISEASES RARE?"

- In 2006, AI/ANs had the second highest rates of chlamydia infection and gonorrhea, and the third highest rate of syphilis in the U.S.<sup>7</sup>
- In 2006 American Indians were over five times more likely than whites to have chlamydia, over four times more likely to have gonorrhea, and almost twice as likely to have syphilis.<sup>8</sup>

# "THEY'RE TOO YOUNG TO HAVE SEX."

- About 19 million new STD infections occur each year, almost half of them among teens and young adults.
- By 2006, 32 Al/AN children younger than 13 years of age had died of AIDS.
- ad

- Centers for Disease Control Fact Sheet, "HIV/AIDS Among American Indians and Alaska Natives. Updated June 2007. Retrieved from "http://www.cdc.gov/hiv/resources/factsheets/aian.htm on 12-13-07
- 2 Ibid.
- 3 Ibid.
- 4 U.S. Department of Health and Human Services and The Office of Population Affairs. Parents, Speak Up! A Guide for Discussing Abstinence, Sex, and Relationships, 2006 (Washington, DC, 2006).
- 5 Centers for Disease Control and Prevention. Retrieved from http://www.cdcnpin.org/scripts/population/native.asp on 6-20-06
- 6 U.S. Department of Health and Human Services and The Office of Population Affairs. Parents, Speak Up! A Guide for Discussing Abstinence, Sex, and Relationships, 2006 (Washington, DC, 2006).
- 7 Centers for Disease Control and Prevention. STD Surveillance 2006, Trends in Reportable Sexually Transmitted Diseases in the US 2006. Retrieved from cdc.gov/std/stats/trends2006.htm on 12/13/07
- 8 Ibid.

- 9 U.S. Department of Health and Human Services and The Office of Population Affairs. Parents, Speak Up! A Guide for Discussing Abstinence, Sex, and Relationships, 2006 (Washington, DC, 2006).
- 10 Centers for Disease Control and Prevention. Retrieved from http://www.cdcnpin.org/scripts/population/native.asp on 6-20-06.

# PARTNER ORGANIZATIONS

## American Indian Science and Engineering Society (AISES)

Pam Silas, Executive Director PO Box 9828

Albuquerque, NM 87119-9828

Tel: 505-765-1052 Fax: 505-765-5608 Email: pam@aises.org Website: www.aises.org

American Indian Science & Engineering Society promotes excellence, leadership, and opportunities in education and professional development for American Indians and Alaska Natives. AISES enriches the fields of science and engineering with Native traditions and strengthens communities with knowledge, resources, and innovation.

## Association of American Indian Physicians (AAIP)

Robert Whitebird, Program Coordinator 1225 Sovereign Row, Suite 103 Oklahoma City, OK 73018

Tel: 405-946-7072 Fax: 405-946-7651 Email: aaip@aaip.com Website: www.aaip.com

AAIP is dedicated to pursuing excellence in Native American health care by promoting education in the medical disciplines and honoring traditional healing practices.

## Ateyapi Abstinence Program Rural America Initiative

Vince Gallagher, Program Coordinator 231 Knollwood Drive Rapid City, SD 57701 Tel: 605-716-0954

The ATEYAPI (which means "fatherhood" in Lakota) mentoring project matches Native American adults with at-risk Native teens to provide guidance, companionship, and academic assistance. The program's goal is to reduce delinquency and high school dropouts and increase academic achievement, self-esteem, cultural knowledge, and social/relationship skills for participants.

## Boys & Girls Clubs in Indian Country

Tel: 1-866-NA CLUBS (or 301-261-6925)

Email: info@naclubs.org Website: www.naclubs.org

The Boys & Girls Clubs in Indian Country's mission is to inspire and enable all young people, especially those from disadvantaged circumstances, to realize their full potential as productive, responsible, and caring citizens.

## IWASIL Boys & Girls Club Seattle, WA

Ryan Wilson, Executive Director 2524 16th Avenue South

Seattle, WA 98144 Tel: 206-325-3942

Email: rwilson@positiveplace.org

The IWASIL Boys & Girls Club's mission is to inspire and enable all young people, especially those from disadvantaged circumstances to realize their full potential as productive, responsible, and caring citizens.

## National Congress of American Indians Youth Commission

Jenifer Rackliff 1301 Connecticut Avenue, Suite 200 Washington, DC 20036 Tel: 202-466-7767

Fax: 202-466-7797 Email: ncai@ncai.org Website: www.ncai.org

## National Council of Urban Indian Health

Geoffrey Roth, Executive Director 501 Capitol Court, Suite 100 Washington, DC 20002 Tel: 202-544-0344

Fax: 202-544-9394

Email: NCUIHNews@ncuih.org Website: www.NCUIH.org

The mission of NCUIH is to support and develop quality accessible healthcare programs for all American Indian and Alaska Natives living in urban communities through advocacy, training, education, and leadership development

## National Indian Education Association

Lillian Sparks, Executive Director 110 Maryland Avenue, N.E., Suite 104 Washington, D.C. 20002

Tel: 202-544-7290 Fax: 202-544-7293 Email: niea@niea.org

The Mission of the National Indian Education Association is to support traditional Native cultures and values, to enable Native learners to become contributing members of their communities, to promote Native control of educational institutions, and to improve educational opportunities and resources for American Indians, Alaska Natives, and Native Hawaiians throughout the United States.

# PARTNER ORGANIZATIONS CONT.

## National Native American Families Together (NNAFT)

Contact Person: Prairie Flower Reuben

121 Sweet Ave. Ste. 123 Moscow, Idaho 83843 Tel: 208-892-8270 Fax: 208-892-8260

Toll Free: 877-205-7501 Email: naft@moscow.com

Website: www.nativefamilynetwork.com

NNAFT is an outreach project to increase partnerships between Native American families with a child with a disability and the professionals serving their children. The NNAFT Parent Center provides information and assistance to families who have children with special needs.

## Native Youth Magazine

Mary Kim Titla, ČEO PO Box 7501

Chandler, AZ 85246 Tel: 602-339-2641

Email: mtitla@hotmail.com

Website: www.nativeyouthmagazine.com

Native Youth Magazine is an on-line magazine targeted at youth and highlights tribal community events in Indian Country, from sports to cultural activities, art, and education.

## Nez Perce Tribe Students for Success Program

Joyce McFarland, Director

PO Box 365 Lapwai, ID 83540 Tel: 208-843-7303 Fax: 208-843-7387

Email: joycem@nezperce.org

The Students for Success Program works to foster personal resiliency and capability for young people to succeed in education, career, community service, and wellness. They promote healthy childhood development and preventing alcohol, tobacco, and other drugs use, violence, and HIV/AIDS.

## Running Strong for American Indian Youth

Lauren Haas Finkelstein, Executive Director 2550 Huntington Avenue, Suite 200

Alexandria, VA 22303-9881

Tel: 703-317-9881 Fax: 703-317-9690

Email: info@indianyouth.org Website: www.indianyouth.org

The Running Strong for American Indian Youth's mission is to help American Indian people meet their immediate survival needs – food, water and shelter – while implementing and supporting programs designed to create opportunities for self-sufficiency and self-esteem, particularly for tribal youth.

## Southern California Indian Center, Inc.

Paula Starr, Executive Director 10175 Slater Avenue, Suite 150 Fountain Valley, CA 92708

Tel: 714-962-6673 Fax: 714-962-6343

Email: pstarr@indiancenter.org Website: www.indiancenter.org

Southern California Indian Center, Inc. (SCIC) goals are to promote social and economic self-sufficiency for American Indian, Native Alaskan, and Native Hawaiian people.

## United National Indian Tribal Youth (UNITY)

J.R. Cook, Executive Director PO Box 800

Oklahoma City, OK 73101 Tel: 405-236-2800 Fax: 405-971-1071

Email: mekko@unityinc.org Website: www.unityinc.org

UNITY's mission is to foster the spiritual, mental, physical, and social development of Native youth and to help build a strong, unified, and self-reliant Native America through involving its youth.

## ◆ PARENT COMMITMENT CARD

A card in the shape of an eagle feather is included to remind parents that they have a responsibility to talk with their children and tell them what they want for their future.



"May You Have The Strength Of Eagles'
Wings, The Faith And Courage To Fly To New
Heights, And The Wisdom Of The Universe To
Carry You There"

~Native American Blessing

Paid for by the DHHS

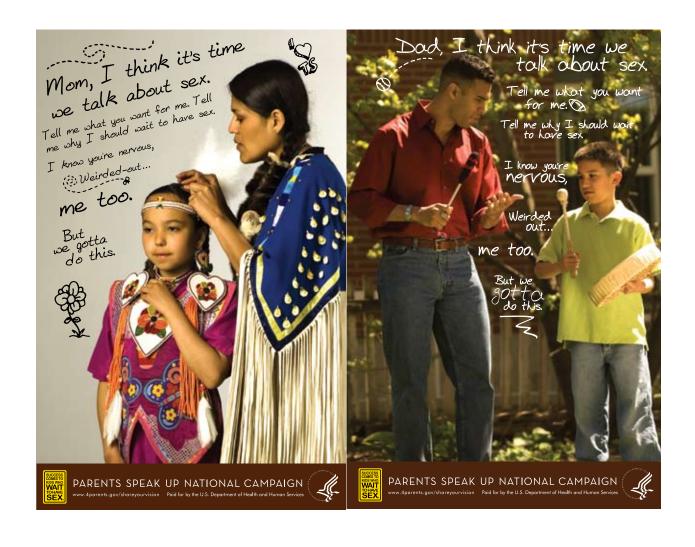
It is my vision that my children have the strength and courage to make important life decisions that honor their self, family, and community. I believe that one of those important life decisions is waiting to have sex. I believe that by waiting, my children will have a better chance to make their dreams come true. I commit to share this vision with my children by talking with them about their future, their responsibilities, and the important life decisions that shape their future.

Signature: \_\_\_\_\_Date: \_\_\_\_

## ATTACHMENT H

## **▶ POSTERS**

Posters are used to communicate the campaign message to your community and may be displayed in your local clinic, school, or community center.



## **ATTACHMENT I**

## **♦ COMPACT DISC**

A CD which includes all of the materials in this kit in an electronic format so you can reproduce as many copies as needed for distribution in your community.



# INDIVIDUAL/ORGANIZATIONAL PLANNING WORKSHEET

**Statement of Commitment:** I believe that one of the most positive things I can do for the future of Native youth is to encourage their parents to talk to them about making healthy choices and delaying sexual activity. I pledge to use my program and to work with other programs and organizations in my community to share this message. Date: Signature:

## **♦ 6 STEPS TO GREAT LOCAL PUBLICITY**

If you want great publicity, it pays to learn a bit about the media—how they work and what they are looking for. Since participants are from both large and small media markets, some of this information may not apply to your situation. Much of it is about obtaining coverage for events, because at least in larger markets, that is a common challenge.

- 1. Get your ducks in a row. Before contacting the media, are your plans in place and are you confident of your facts? If you are representing an organization, is leadership okay with seeking media? Are you available to be interviewed or do you have someone else lined up? Are all key individuals on board?
- 2. Identify your central message and target audience. For example, the key message of our program is "Parents, you can use tribal traditions to share your vision for your child and encourage them to delay sexual activity." We also have talking points. Our target audience is parents, but at different times could also include youth or the general community. What is your target audience? Where do they get their information and how can you hook them in?
- 3. Identify local media outlets. It's okay to prioritize some media outlets may be more important to you than others. Call and ask: What newspaper section or TV/radio program does my event fit into? Who is in charge of that section? What are the deadlines? Should I use fax, email (most common) or regular mail?
  - Tribal newsletters and newspapers
  - Other newspapers
  - Tribal, organizational, school, company, and church newsletters
  - TV and radio stations
  - Media/community/tribal/school websites
- Health fairs and tribal/community events
- Bulletin boards in stores, schools, or other community venues
- Online community calendars
- Blogs, MySpace

You can just send info to the newsroom, but it's usually more effective to identify the right individual within an organization. Local stories can be initiated by either a reporter or an editor who can include the staff roles listed below.

- Community calendar editors
- Assignment editors (they assign the reporters in TV news)
- Health reporters
- Social service reporters
- General assignment reporters

- Native American beat reporters
- Editorial page editors
- Website editors
- TV/radio producers
- Radio deejays

- **4. Make the contact.** In general, announce events with a written press release or media advisory bulletin emailed or faxed to local media at least 2 or 3 weeks ahead (or even earlier in the case of weekly or monthly publications.) Include contact information plus "who, what, where, when, and why"—and why your info might be important to readers/ viewers.
  - If you don't hear back, follow up. If you have a particular media outlet in mind, you can simply make a call or email a reporter or editor. Always follow up by email or fax. Include official names, titles, schedules/starting times, etc. With proper follow up, fewer errors will end up in the newspaper or on TV.
  - For features/human interest stories, call the reporter or editor to determine the level of interest and how to proceed. These are usually offered to one media outlet as an exclusive, not released all at the same time.
  - There are lots of online community calendar listings for events. Check websites
    for local newspapers, TV and radio stations, tribes, city-county sites, etc. Some of
    them have online submission forms, for others you can send an email to follow up
    your call.
  - Editors of newsletters, smaller newspapers, and magazines may be delighted to run your release as is, and may even give you a byline. Larger media outlets will rewrite or assign a reporter.
  - Press conferences are only used for major announcements in urban areas (where reporters and sources can easily gather) or for a big story where a lot of reporters want to interview someone at the same time.
  - There is a difference between news, features, and editorial page coverage.
    - "Hard" news new policies, statistics, crime, etc. Reporter usually seeks to balance stories with more than one source
    - Features "human interest" stories can be serious or light and are often tied
      to an issue or upcoming event such as back-to-school, first swim of summer,
      etc. Newspapers often have weekly sections (e.g., cooking, health) that might
      like your story. TV stations may have local news or talk shows. You are far
      more likely to get feature coverage if there is some event, free offer, or other
      way to involve the public.
  - Editorial section where a newspaper takes official positions on issues. These are determined by an editorial board that is separate from the regular news staff.
    - "Op-Ed" guest columns written for the editorial pages.
    - · Letters to the editor
    - For television reporters, think visuals. They need on-camera interviews, activities, and locales. Local TV news may announce your event ahead of time and send a crew or just a camera operator when the event is under way. (Especially on slow news days like Saturdays.)
    - If a reporter calls you, ask when you can call back. Take some time to gather your thoughts and information. Determine your strategy and two to three key points. Never go off the record. Be yourself.
    - For TV interviews The reporter will probably ask you four or five questions, but will only use about 15 seconds. Emphasize your key points as clearly as you can within each answer. Do not wear red, white, black, tight patterns, or big jewelry.

- Help reporters meet their deadlines. Unlike most office workers, they frequently start late and work late in order to meet their tight deadlines. Their deadlines are not flexible, they work on very short timeframes, and if a big story breaks out they may have to cancel appointments at the last minute or even pack up their cameras and leave unexpectedly. This can be frustrating, but they are not being rude.
- Unlike paid advertising, you don't control a publicity story. To be most effective you want to be available, informative, helpful, and focused on your message. Don't ask a reporter to see the story in advance.
- 5. Get your message out in other ways. Multiple methods work best. Identify informal health, education, childcare, and tribal government networks and use your contacts/relationships to get the word out. Are you on the Internet? MySpace? IM and Text messaging? Could you write a blog? Post flyers on bulletin boards? Release announcements at schools? Enlist everybody involved to network for you. Give them samples of your flyers, press release, etc., so that everybody is well-informed. If you are expecting coverage, give them a heads up.
- 6. Follow up. If a reporter or editor has been particularly helpful, thank them with a quick note or email. If there is a problem with a story, call the reporter and his/her editor if necessary. At your event, ask how people found out about it. This can be done on a signin sheet or informally. After the event is over, analyze the publicity. What worked, what didn't work, what would you do differently next time?

